

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-261-4073

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

Garrett for Statehouse Committee

IMPORTANT: Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Julian B. Garrett

Political Party (if applicable)
Republican

Office Sought

Iowa House of Representatives

District (if Senate or House)
73

FORM

DR-2

(Rev. 12/2009)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

1654

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A May 19, 2010

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 2

☐ CHECK IF AMENDMENT TO REPORT DATED

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 5,511.93

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

2,610.46

Schedule F: Loans Received total (Attach Schedule F)

5,000.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 13,122.39

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

7,867.94

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 5,254.45

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$ 0.00

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 317.17

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$ 9,000.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS



CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Garrett for Statehouse Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
1/16/2010	ID# CK#	Burl Beam 515 Burlington Ave Martensdale, IA 50160		\$50.00	<input type="checkbox"/>
1/16	ID# CK#	Kim Hand 3856 Harrison St Norwalk, IA 50211		25.00	<input type="checkbox"/>
1/16	ID# CK#	Marilyn Kharouf 6415 Lisbon St Prole, IA 50229		50.00	<input type="checkbox"/>
1/16	ID# CK#	Don Paulin 7557 30th Ave Norwalk, IA 50211		50.00	<input type="checkbox"/>
1/16	ID# CK#	Jerry Shepler 5302 Delaware St Norwalk, IA 50211		50.00	<input type="checkbox"/>
1/16	ID# CK#	Merril Tuttle 2783 Pierce St St. Charles, IA 50240		50.00	<input type="checkbox"/>
1/16	ID# CK#	Ken King 5867 Gear St Prole, IA 50229		35.00	<input type="checkbox"/>
1/30	ID# CK#	Jack Soulis 1207 1st St Redfield, IA 50233		50.00	<input type="checkbox"/>
2/30	ID# CK#	Unitemized Items		10.00	<input type="checkbox"/>
2/6	ID# CK#	Phil Higgins 6488 Saratoga St New Virginia, IA 50210		100.00	<input type="checkbox"/>

SUB-TOTAL

\$ 470.00

TOTAL (if last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 5
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Garrett for Statehouse Committee

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2/6	ID# CK#	Beth Isaac 3049 Roosevelt St New Virginia, IA 50210		\$40.00	<input type="checkbox"/>
2/6	ID# CK#	Unitemized		35.46	<input type="checkbox"/>
2/13	ID# CK#	Angela Oberreuter 30162 Meadow Rd Adel, IA 50003		100.00	<input type="checkbox"/>
2/20	ID# CK#	Bob Shetterly 4978 65th Ln Carlisle, IA 50047		20.00	<input type="checkbox"/>
2/27	ID# CK#	John Maxwell 4010 Franconia Rd Alexandria, VA 22310		100.00	<input type="checkbox"/>
3/4	ID# CK#	Noel Vincent 22163 160th Ave Liberty Center, IA 50145		100.00	<input type="checkbox"/>
3/4	ID# CK#	Karen Daugherty 418 N Central Ave Lacona, IA 50139		100.00	<input type="checkbox"/>
3/4	ID# CK#	Phil Thompson 17356 Tyler St Lacona, IA 50139		50.00	<input type="checkbox"/>
3/4	ID# CK#	Bill Daugherty 105 N East Ave Lacona, IA 50139		20.00	<input type="checkbox"/>
3/6	ID# CK#	Cindy Brewbaker 805 Sunset Dr. Indianola, IA 50125		20.00	<input type="checkbox"/>
SUB-TOTAL				\$ 585.46	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐

CHECK THIS BOX IF
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COMMITTEE NAME (Must be same as on Statement of Organization)

Garrett for Statehouse Committee

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3/29	ID# CK#	Roberta Lucas 3145 220th Ave Hartford, IA 50118		\$50.00	<input type="checkbox"/>
3/29	ID# CK#	Wayne Lucas 3145 220th Ave Hartford, IA 50118		20.00	<input type="checkbox"/>
3/29	ID# CK#	Lynn Schulte 5142 Hempstead St Prole, IA 50229		50.00	<input type="checkbox"/>
3/29	ID# CK#	Harlan Hirsch 13045 R-57 Hwy Indianola, IA 50125		30.00	<input type="checkbox"/>
3/29	ID# CK#	Leigh Carpenter 7705 Hwy 28 Prole, IA 50229		40.00	<input type="checkbox"/>
3/29	ID# CK#	Chloris Haas 21741 Hwy 65 Milo, IA 50166		50.00	<input type="checkbox"/>
3/29	ID# CK#	Delmar Kalbus 21573 120th Ave Indianola, IA 50125		25.00	<input type="checkbox"/>
3/29	ID# CK#	Ramona Reed 23995 120th Ave. New Virginia, IA 50210		25.00	<input type="checkbox"/>
3/30	ID# CK#	Bill Thomas 908 Caroline Terrace Indianola, IA 50125		100.00	<input type="checkbox"/>
4/1	ID# CK#	Teri Kobussen 17495 88th Ave. Indianola, IA 50125		100.00	<input type="checkbox"/>

SUB-TOTAL

\$ 490.00

TOTAL (if last page of this schedule)

\$

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
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COMMITTEE NAME (Must be same as on Statement of Organization)

Garrett for Statehouse Committee

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
4/1	ID# CK#	Joy Leggett 15138 90th Ave Indianola, IA 50125		\$25.00	<input type="checkbox"/>
4/2	ID# CK#	George Buck 1514 W Court Ave Winterset, IA 50273		20.00	<input type="checkbox"/>
4/2	ID# CK#	Paula Tann 17497 88th Avenue Indianola, IA 50125		25.00	<input type="checkbox"/>
4/2	ID# CK#	Don Ekleberry 205 N West St Truro, IA 50257		25.00	<input type="checkbox"/>
4/8	ID# CK#	Larry Borchert 12568 Quaker St Indianola, IA 50125		100.00	<input type="checkbox"/>
4/8	ID# CK#	Marvin Spear 15788 160th Ave Indianola, IA 50125		10.00	<input type="checkbox"/>
4/6	ID# CK#	West Tish 2456 Hiatt Apple Trail Winterset, IA 50273		50.00	<input type="checkbox"/>
4/6	ID# CK#	Craig Boldman 521 Green Winterset, IA 50273		10.00	<input type="checkbox"/>
4/12	ID# CK#	Janet Erwin 4805 Tyler St New Virginia, IA 50210		10.00	<input type="checkbox"/>
4/14	ID# CK#	Phil Macumber 909 W Court Ave Winterset, IA 50273		15.00	<input type="checkbox"/>
SUB-TOTAL				\$ 290.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Garrett for Statehouse Committee

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
4/21	ID# CK#	Max Tucker 3060 Applewood Ave Macksburg, IA 50273		\$20.00	<input type="checkbox"/>
4/20	ID# CK#	Don Phillips 6884 43rd Ave Norwalk, IA 50211		30.00	<input type="checkbox"/>
5/1	ID# CK#	James L. Butler 2341 Kennedy St Charles, IA 50240		100.00	<input type="checkbox"/>
5/1	ID# CK#	Dick Nation 7502 25th Ave Norwalk, IA 50211		100.00	<input type="checkbox"/>
5/8	ID# 6070 CK# ?	IOWA LAWPAC 625 East Court Ave Des Moines, IA 50309		500.00	<input type="checkbox"/>
3/29*	ID# CK#	Clint Bauer 22406 Highway 65 Lacona, IA 50139		25.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

* Out of Date Order.

SUB-TOTAL

\$ 775.00

TOTAL (if last page of this schedule)

\$ 2610.46

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Garrett for Statehouse Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/6/2010	ID# CK#	Record Herald 112 N Howard Indianola, IA 50125	Martensdale Ad	\$ 85.60
1/10	ID# CK#	Julian B Garrett 19978 115th Ave Indianola, IA 50125	Reimbursement for Printer Ink	68.85
1/18	ID# CK#	Julian B Garrett -same as above-	Reimbursement for Printer Ink	275.25
1/25	ID# CK#	Dallas County Today 705 Main St Adel, IA 50003	Ad for Town Hall Meeting	137.50
1/26	ID# CK#	Van Ginkel 2208 Ingersoll Des Moines, IA 50312	Shirts	165.36
1/29	ID# CK#	Martensdale Comm. Church P.O. Box 200 Martensdale, IA 50160	Rent for Town Hall Meeting	20.00
1/31	ID# CK#	Winterset Shopper P.O. Box 28 Winterset, IA 50273	Ad for Town Hall Meeting	53.00
2/4	ID# CK#	Walgreens 1000 N Jefferson Indianola, IA 50125	Ink for Printer	42.36
SUB-TOTAL				\$ 847.92
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Garrett for Statehouse Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
2/5	ID# CK#	Victory Store 5200 SW 30th St Davenport, IA 52802	Signs and Bumper Stickers	\$ 3,140.50
2/11	ID# CK#	Record Herald 112 N Howard Indianola, IA 50125	Ad for Town Hall Meeting	85.60
2/28	ID# CK#	Walgreens 1000 N Jefferson Indianola, IA 50125	Printer Ink and Envelopes	26.09
2/26	ID# CK#	Record Herald 112 N Howard Indianola, IA 50125	Ad for Town Hall Meeting	85.60
3/3	ID# CK#	Copy Plus 116 W Ashland Indianola IA 50125	Envelopes and Printing	117.66
3/2	ID# CK#	Postmaster 201 W 1st Street Indianola, IA 50125	P.O. Box Rental and Postage	278.00
3/4	ID# CK#	Winterset Shopper P.O. Box 28 Winterset, IA 50273	Ad for Town Hall Meeting	53.00
3/4	ID# CK#	Earlham Advocate P.O. Box 327 Earlham, IA 50072	Ad for Town Hall Meeting	87.50
SUB-TOTAL				\$ 3,873.95
TOTAL (if last page of this schedule)				\$

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Garrett for Statehouse Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
3/13	ID# CK#	Walgreens 1000 N. Jefferson Indianola, IA 50125	Printer Ink	\$ 48.23
3/13	ID# CK#	Walmart 1500 N Jefferson Indianola, IA 50125	Printer Ink	88.98
3/15	ID# CK#	Copy Plus 116 W Ashland Indianola, IA 50125	Letters	206.70
3/17	ID# CK#	DeSoto United Methodist Chur. P.O. Box 437 De Soto, IA 50069	Rent for Town Hall Meeting	50.00
3/17	ID# CK#	Postmaster 201 W 1st St. Indianola, IA 50125	Postage	88.00
3/13	ID# CK#	Walgreens 1000 N Jefferson Indianola, IA 50125	Printer Ink	32.47
3/28	ID# CK#	Walgreens 1000 N Jefferson Indianola, IA 50125	Printer Ink	34.45
3/30	ID# CK#	Fareway 1309 W 2nd Indianola, IA 50125	Food for Town Hall Meeting	25.16
SUB-TOTAL				\$ 573.99
TOTAL (if last page of this schedule)				\$

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Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Garrett for Statehouse Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4/1	ID# CK#	Copy Plus 116 W Ashland Indianola, IA 50125	Flyers	\$ 466.40
4/5	ID# CK#	Victory Store 5200 SW 30th St Davenport, IA 52802	Car Magnets	80.50
4/6	ID# CK#	Winterset Presbyterian Chur. 210 West Green Winterset, IA 50273	Rent for Town Hall Meeting	60.00
4/9	ID# CK#	Warren Town & Country News 1325 Sunset Dr Norwalk, IA 50211	Ad for Town Hall Meeting	42.50
4/24	ID# CK#	Menards 6000 SE 14th Des Moines, IA 50320	Iron Rods and Wire	424.50
5/4	ID# CK#	Postcard Mania 2145 Sunnydale Blvd., #102 Clearwater, FL 33765	Mailing Setup	723.00
5/10	ID# CK#	Copy Plus 116 W Ashland Indianola, IA 50125	Flyers	209.35
5/11	ID# CK#	The Shopper 215 North 1st Ave. Winterset, IA 50125	Ad for Town Hall Meeting	47.70
SUB-TOTAL				\$ 2,053.95
TOTAL (if last page of this schedule)				\$

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Garrett for Statehouse Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5/13	ID# CK#	Record Herold 112 N Howard Indianola, IA 50125	Advertising	\$ 85.60
5/4	ID# CK#	Postcard Mania 2145 Sunnysdale Blvd., #102 Clearwater, FL 33765	Mailing	432.53
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 518.13
TOTAL (if last page of this schedule)				\$ 7,867.94

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Garrett for Statehouse Committee

Reset Form

SCHEDULE
E
(Rev. 06/97)

IN-KIND
CONTRIBUTIONS

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
1/3/2010	Gerald Weeks, Jr. 323 E 1st St Milo, IA 50166		Martensdale Posters	\$ 21.30	<input type="checkbox"/>
1/16	Richard Nation 7502 - 25th Ave. Norwalk, IA 50211		Food for Town Hall Mtg.	15.00	<input type="checkbox"/>
1/25	Gerald Weeks, Jr. -same as above-		Redfield Posters	21.30	<input type="checkbox"/>
1/25	Jack Soulis 1207 1st St Redfield, IA 50233		Food for Town Hall Meeting	10.67	<input type="checkbox"/>
1/25	Jack Soulis -same as above-		Rent for Town Hall Meeting	30.00	<input type="checkbox"/>
2/1	Gerald Weeks, Jr. -same as above-		New Virginia Posters	21.30	<input type="checkbox"/>
2/6	Kim Kirkpatrick		Food for Town Hall Meeting	10.00	<input type="checkbox"/>
2/6	Gerald Weeks, Jr. -same as above-		Hartford Posters	21.30	<input type="checkbox"/>
2/8	Gerald Weeks, Jr. -same as above-		Macksburg Posters	21.30	<input type="checkbox"/>
2/16	Bob Witt, Jr.		Rent for Town Hall Meeting	25.00	<input type="checkbox"/>

SUB-TOTAL \$ 197.17

TOTAL (if last
page of this
schedule)

\$

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2
(for Schedule E)

COMMITTEE NAME (Must be same as on Statement of Organization)

Garrett for Statehouse Committee

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND
CONTRIBUTIONS☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
2/16	Mary Lou Witt		Food for Town Hall Meeting	\$ 15.00	<input type="checkbox"/>
2/20	Verle Spence 220 West Elm St Hartford, IA 50118		Rent for Town Hall Meeting	25.00	<input type="checkbox"/>
2/20	Margie Spence -same as above-		Food for Town Hall Meeting	12.00	<input type="checkbox"/>
3/4	Russell Burnett		Rent for Town Hall Meeting	20.00	<input type="checkbox"/>
3/4	Bret and Donna Clay		Food for Town Hall Meeting	10.00	<input type="checkbox"/>
3/11	Dave Arzani		Food for Town Hall Meeting	12.00	<input type="checkbox"/>
4/6	Bob Kaldenberg 323 West Jefferson Winterset, IA 50273		Food for Town Hall Meeting	11.00	<input type="checkbox"/>
4/20	Wendell Starmer		Food for Town Hall Meeting	15.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$
120.00TOTAL (if last
page of this
schedule)\$
317.17

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RESET**COMMITTEE NAME**(Must be same as on Statement of Organization)

Garrett for Statehouse Committee

SCHEDULE

F

(Rev. 02/08)

**LOANS
RECEIVED
& REPAYED**☐ **CHECK THIS BOX IF
AMENDING FORM****NOTE:** This schedule reports money loaned to the committee which is deposited in the committee account.**TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD** \$ 4,000.00**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
5/7/2010	Julian B. Garrett 19978 115th Avenue Indianola, IA 50125	Self	\$ 5,000.00

TOTAL (PART I)

\$ _____

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II)

\$ -0-

From Schedule E -- TOTAL LOANS FORGIVEN

\$ -0-

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$ 9,000.00

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.